

Adult Social Care Compliments and Complaints

Annual Report
2024/25

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Introduction

Feedback from customers is vital to any organisation in making improvements. BCP Council Adult Social Care (ASC) welcomes and encourages feedback by any means including complaints, compliments, comments, surveys, consultation, engagement and audits and uses this feedback systematically to make improvements.

Local authorities have a statutory responsibility to report complaints and other representations about health and adult social care under the Local Authority Social Services and National Health Service (NHS) Complaints (England) Regulations 2009. These require councils and NHS bodies to produce an annual report about the complaints they have received, issues that have been raised and any action that has been taken to improve services.

This annual report covers compliments, complaints and related learning for the period 1 April 2024 to 31 March 2025. It aims to review the management and performance of the statutory complaints and representations process in 2024/25 (including statistics, the nature of complaints and compliments received, and how the learning from these has been used to improve services).

Executive Summary

In 2024/25 the total number of complaints for BCP Council Adult Social Care was **195**. This compares to a total of **180** in 2023/24. This is in line with the regional trends recorded by neighbouring authorities within the Southern area.

Communication, financial matters and assessment and eligibility have been highlighted as the most common themes from complaints:

- Complaints around communication was raised in 97 complaints
- Complaints relating to issues surrounding financial matters was raised in 72 complaints
- Issues relating to assessment and eligibility was raised in 59 complaints.

Of the 195 complaints brought, it was the council's view that, overall 24 were upheld, 35 were partially upheld and 135 were not upheld, however learning from any feedback is always considered. 1 complaint remains open at the time of writing this report.

Throughout the year 12 people made more than one complaint. Whilst the Complaints Team cannot investigate for a second time a complaint that has already been answered and concluded the process, complainants may bring additional complaints about new issues, should the need arise.

A total of **202** individual concerns and general enquiries were managed outside the complaints process. These individuals did not wish to pursue a complaint despite being offered the service, but felt they needed support to resolve a situation. These cases were dealt with in conjunction with Adult Social Care operational teams or signposting to the correct service, such as Safeguarding services.

In addition to the complaints and concerns received, a further **59** representations were received from MPs and Councillors on behalf of their constituents and residents. During 2023/24 39 MP and Councillor representations were received.

It is important to note that BCP Council Adult Social Care also received **219** compliments and messages of thanks during 2024/25. 228 compliments were recorded in 2022/23. During 2024/25 we continued to receive good news stories in a variety of methods, such as verbal reporting forms, Our Journey's and Stories of Difference. These ways of recording continue to be used and have become embedded in the formal recording of compliments. By having alternative ways to record good news, it strengthens our culture of continuous learning.

Adult Social Care alone serves around 4215 adults and 6992 carers, out of a local population of **399000**. Therefore, less than 2% of the people using services have sought to make a complaint about Adult Social Care.

Over the year, feedback and lived experience has also been sought via other Quality Assurance tools such as consumer surveys, staff surveys, consultations, and stakeholder engagement activity. These findings feed into quality assurance reporting to senior leaders for direction and to influence future planning.

Complaints

It is stated in legislation that most complaints should be resolved by local resolution. This means trying to resolve complaints at the earliest opportunity and as close to the point of service delivery as possible. An in-depth investigation may be carried out if it is judged by the Complaints Manager to be the best way to respond to the issues raised, usually in complex cases. The complainant can also approach the Local Government and Social Care Ombudsman (LGSCO) at any stage of the complaints process. Read more about the statutory process at [Appendix 1](#).

Summary of complaints activity in 2024/25

	2024/25	2023/24	Comments
Complaints received	195	180	Whilst there was a small increase in complaints this year it should be noted that cases are becoming more complex and this is reflected in the number of themes recorded this year. Whilst this increase is in line with both a regional and national trend the Complaints Team continue to monitor this. Learning from complaints is fed into other quality assurance activity to ensure that services remain accessible and supportive to people who draw on our services.
Complaints acknowledged within 3 days	99% (194)	98% (177)	One complaint acknowledgement was delayed due to work pressures.

	2024/25	2023/24	Comments
Resolved at local resolution	92% (179)	86% (155)	The percentage of complaints resolved at an early stage through local resolution remains high and has increased since 2023/24. 16 complaints from this reporting year went to the Ombudsman for review as the complainant was not happy with the local resolution offered. 3 of these complaints were accepted for investigation.
Resolved within 20 days	61% (118)	62% (112)	20 working days is the target set locally for resolution. Staff availability was the most common reason for complaint responses being delayed, however complexity of the complaint and the need to involve more than one investigating officer was also a factor. Where delays were unavoidable, complainants were kept informed and updated of when they could expect a response by. Whilst 20 working days is considered to be our best practice, this is not a statutory timescale.
Formal/in-depth Investigations	0	1	In 24/25, no cases required a formal in depth investigation.
The Unreasonably Persistent Complaints process	1% (1)	1% (1)	This year we have had to invoke the Unreasonably Persistent Complaints process on one occasion due to the protracted nature of the complaints. The Complaints Team are also managing a number of situations where persistent contact from complainants requires communication plans to manage expectation.

Complaints made to the Local Government and Social Care Ombudsman (LGSCO)

16 complainants referred their complaint to the ombudsman for an independent review during 2024/25. This is a decrease from 2023/24 where 25 complaints progressed to the Ombudsman for consideration.

Common themes for investigation during 2024/25 were around delay in providing service, assessed needs and matters relating to financial assessments/charging for care.

The Ombudsman chose not to investigate 13 of the 16 referrals as either they had not yet gone via the Council's complaint processes or the Ombudsman could not find fault with the investigation undertaken by the Council and that everything had already been done to remedy the situation. The Council, Complaints team and responding managers have worked hard to ensure that robust responses are provided and resolutions are found at the earliest stage.

Therefore, **3 complaints** from reporting year 2024/25 were investigated this year, compared to 10 investigations in 23/24.

- 1 decision received was upheld
- 2 remain under investigation at the end of year 2024/25

6 further decisions were received which were outstanding from 2023/24.

- 4 decisions were upheld
- 2 decisions were not upheld

Details of the referrals where there has been a decision can be found in [Appendix 2](#).

Complaint themes

To enable detailed recording and identification of key areas of learning and improvement, complaints may have more than one theme recorded. In 2024/25, whilst 195 complaints were received, a total of 418 individual themes were recorded. In addition, the upheld rate recorded includes complaints partially and fully upheld.

Complaint theme	2023/24	2024/25	Upheld rate
Communication (perceived inadequate communication, information and advice)	123	103	36% (37)
Finance (decisions around funding, invoice disputes/delays, self-funders approaching the council for funding, financial assessment)	102	93	20% (19)
Decision around assessment and eligibility	39	59	34% (20)
Professional Practice (level of support and guidance, feeling involved/empowered in assessment process)	29	57	32% (18)
Delay in providing a service	31	38	58% (15)
Policy or process	27	30	27% (8)
Quality of domiciliary provision	11	14	29% (4)
Quality of residential or nursing home	7	7	14% (1)
Commissioning	6	6	33% (2)
Hospital discharge process – with Health partners	2	5	20% (1)
Extra Care Housing	3	3	0% (0)
Safeguarding process	4	1	0% (0)
Contact centre delay	0	1	100% (1)
Respite	2	0	0% (0)

Communication

Many of the complaints around communication relate to providing information in a timely manner and families not feeling as involved as they would have liked to have been. The Council maintain Practice Standards relating specifically to communication that continue to be reflected on by practitioners when engaging with people who come into contact with our services.

In addition, the introduction of Co-pilot (AI) has provided Council Officers with an additional resource to support with managing communication. This system whilst still in its introductory phase is becoming embedded within ASC services and any efficiencies that this system affords will continue to be monitored during 2025/26.

Financial (funding issues, charges or fees)

Individual complainants have challenged national and local policy decisions in terms of funding eligibility. Where disputed, re-assessment may be offered to ensure that BCP Council have a clear understanding of a person's financial position in line with appropriate policy. During 2024/25 work has taken place to ensure staff are clear when making decisions around policy and also to strengthen the information that the Council provides to people when access services.

Decision regarding assessment and eligibility

Difficult conversations are often held around what services can or cannot be provided in line with Care Act 2014 eligibility criteria. Again, where appropriate, re-assessments have been undertaken to ensure that BPC Council ASC have a clear understanding of a person's needs where disputed. This ensures that a person's care needs remain being met and that eligibility in line with both policy and the Care Act 2014 is assured.

The lessons we have learnt from customer feedback

In year the main learning points have focussed around:

- Improving and simplifying communication standards internally between teams, with our providers and with people using the services of Adult Social Care.
- Addressing the issues surrounding delay when providing services and enabling people to access alternative provisions of care. The ASC Strategy and Transformation Plans focus on new ways of working and prevention, and early indications show that people are now waiting less time to be supported. In addition to improve the time people were waiting, staff were redeployed to focus on areas where people were waiting longest.
- Improving DFG processes and applications – focus was given on working with Housing colleagues to improve the process, new staff were employed to work across Housing and ASC to ensure a more joined up approach, and strategic level meetings were put in place to analyse learning about adaptations.

Desired outcomes to complaints are often specific to the case, but when there are organisational learning points that influence policy or procedure, they are acted upon. Individual case learning is dealt with directly with the complainant and more general issues are managed through supervision with team managers and reminders at team meetings.

ASC now has a well-established monthly Performance and Quality Improvement Board which reviews data and feedback from people, to ensure actions are being taken to improve services where needed. This has meant we are now triangulating complaint themes and learning, with

other quality assurance findings and performance measures, allowing more evidence-based decisions to be made about how to improve services.

Please see a full table of learning, including organisational learning, being rolled out across the BCP Council area in [Appendix 4](#).

Monitoring the effectiveness of the complaints procedure

A routine online feedback survey is sent to complainants after the process has closed, response rates tend to be variable with not everyone wishing to engage further with the process after their issues have been resolved. However, complimentary feedback has been received by the team, thanking them for their support and facilitation in managing complaints both by complainants and by managers responding to complaints. During 2025/26 the complaints team, now a centralised service will seek to align how all areas receive and collate feedback for future use.

Staffing of the complaints service

Currently there are two full time officers in post who manage the day-to-day statutory and corporate complaints process for ASC. This includes acknowledging complaints, recording and documenting details, tracking and monitoring each case and quality assuring responses to make sure all elements of the complaints are answered. The team also ensure that complainants are kept up to date with progress on their complaints and facilitate meetings where requested. The complaints team were centralised in April 2024, with colleagues from both statutory and corporate functions, aligning services and strengthening the team's flexibility making the service more robust.

Training

There is an online complaints training module for practitioners to use across the whole of social care and has now been added to Adult Social Care Mandatory training schedule.

Bespoke workshops and team-focused complaints training has been delivered both online and in person by the complaints team. This training has been well received and strengthened the working relationship between the complaints staff and operational teams and creating a more robust service. This programme of training will continue through 2025/26. This is in conjunction with the training being developed by the central service to align with new policy for corporate complaints which is in conjunction with the new complaint handling code that has been introduced by the Local Government and Social Care Ombudsman. In addition, additional support has been given to our providers to strengthen their complaints processes and regular reminders detailing updated policy are sent to our providers. The complaints team remain available to our providers and offer support and guidance during the complaints process.

An online staff complaints toolbox is also available to provide support; the tool kit includes staff guidance, documents such as letter templates, language checklists, legislative information and LGSCO information.

Compliments

People who draw on services and staff are encouraged to report feedback about services. Compliments are vital because they help to give us a complete picture of opinions about services. In addition to complaints, they can help us make changes to improve services further by identifying good practice.

In total, **219** compliments and messages of thanks were received. This excludes any positive messages received through the How Did We Do feedback forms. The recording and reporting of these will, moving forward, be recorded by the complaints team into 25/26.

Areas where the highest numbers of compliments have been received	2024/25
Community Teams	92
Contact Centre	22
Direct Payment	21
Statutory Services and Safeguarding	16
Hospital Social Work	14
Finance	12
Shared Lives	11

Themes of compliments (excluding thank you's)

Themes of compliments received	2024/25
Professional approach	104
Communication	83
Manner	74
Information provided	34
Positive Relationship	29
Carers Service (specific)	1

Compliments and positive feedback are shared with staff on a regular basis through the staff newsletter and Good News webinars. At the same time, teams are reminded to feedback comments from adults and carers and many teams now have a systematic way of doing this. Moving forward into 2025/26, then additional work surrounding fully exploring the themes of compliments and their impact will be fed into our quality mechanisms to ensure that we are embedding good practice amongst services.

A small selection of compliments are detailed below:

“

I would like to compliment you for your help, support and advice during the past year it has been tough for us all but you helped to make the process easier and gave us the advice which enable us to keep mum at home.

”

“

It was our good fortune and pleasure to meet you and have you do our care plan. You are extremely good at the way in which you put us at ease. Kind and considerate and a very good listener too. A true gentleman in your profession for which we are very grateful

”

“

You are extremely professional in your role as Practice Supervisor which is evidenced during my supervision with you and the learning opportunities you have given me. Including being able to attend a Mental Health Act assessment which I will remember forever as part of my journey with your amazing team.

”

“

I'd like to thank you for everything literally everything. You're 1 in a million! Thank you for all the advice you've given me. Thank you for always being there. I will be lost without you when I'm discharged! You stuck to your promise of giving me my full independence in our forever home.

Appendix 1 – the Joint Adult Social Care and Health Complaints Procedure

What is a complaint?

An expression of dissatisfaction or disquiet about the actions, decisions or apparent failings of a local authority's adult social care services provision which requires a response.

What is a representation?

A comment, suggestion or compliment made about the service provided. Legislation states that if it is possible to resolve a lower level matter immediately or within 24 hours, there is no need to engage the complaints process.

Who can complain?

An adult who is entitled to, or has a possible need for, a personal social service at any stage in their contact with the service. They also qualify if they are acting on behalf of the adult as their representative and acting in their best interests.

How the procedure works

a) Local resolution

In the majority of cases, a problem-solving approach will be adopted to resolve complaints as close to the point of service delivery as possible. Most complaints are resolved using this approach and typically by the operational manager. Timescales for responding to complaints are agreed between the complainant and the Complaints Officer. Locally, complaints are normally responded to within 20 working days. If the complainant is not satisfied with the outcome of their complaint they have the option to ask for their complaint to be formally investigated or to request a further meeting, or they can ask the Local Government and Social Care Ombudsman to consider their complaint.

b) Formal investigation

In discussion with the complainant and Complaints Officer, an investigation can be invoked rather than using local resolution. The risk, complexity and seriousness of the complaint will be considered when making this judgement.

An in-depth examination of the complaint is completed by an investigating officer who is independent of the service area. A report will be compiled and forwarded to the Director of Service who acts as an adjudicator and will identify the Service Unit's response/decision on each point of complaint and any actions with timescales for implementation. Timescales are agreed between the complainant, the responding manager and the investigating officer.

c) Local Government and Social Care Ombudsman (LGSCO)

The complainant can approach the LGSCO at any time during the procedure or if they remain unhappy after the local authority's efforts at resolution have been exhausted. However, if the ombudsman considers that issues could be resolved at a local level, they will refer the complaint back to the local authority.

Complaints that have both health and social care elements

There may be some occasions when complaints have elements of both health and social care services. If so, the Complaints Officer will look at the issues and decide whether the Protocol for Dealing with Joint Complaints needs to be adopted and the complaint progressed in accordance with this route.

Appendix 2 – Local Government and Social Care Ombudsman (LGSCO) decisions received.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
23/24	The complaint centralised around the Council's delay in assigning a social worker and completing an assessment of their daughter's care and support needs.	Delay; Decision around funding	Upheld	The Ombudsman recognised that the Council apologised for the delay when it responded to the complaint, and it confirmed it was working hard to improve its waiting times. The Ombudsman however, did not consider this suitable remedy as during assessment, the Council determined that the person concerned needed care and support. The representative was also noted to be heavily involved in supporting the person's need and so a financial reward to recognise the uncertainty caused by the delay was awarded.
23/24	The complainant complained the Council had delayed processing their daughter's Disabled Facilities Grant application.	Delay in providing service; Delay in financial assessment; Communication	Upheld	It was noted that the Council confirmed it has employed and is continuing to employ new members of staff to address the shortages in the team. The Ombudsman recognised that there has been a notable reduction in the waiting lists due to a streamlining in the process for how the Council deals with referrals. The Ombudsman welcomed the Council's apology and service improvements made, but awarded the family a financial remedy in recognition of the delay experienced.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
23/24	The complainant complained their family were not told in advance there would be a financial contribution towards care costs when his disabled child turned 18. As part of this complaint, concerns were also raised regarding the content of the financial assessment as it was felt that the Council had not taken consideration of appropriate contributions in their calculations.	Decision around assessment and eligibility; Decision around funding	Upheld	The Ombudsman agreed that many of the considerations requested by the complainant had suitably been considered by the Council based on the information provided by the family. The Ombudsman did, however, did ask that the Council re-assess the person's contribution subject to additional evidence being provided by their family and backdate funding as necessary. In addition, the Ombudsman also asked the Council to produce or amend guidance to families on DRE so they are aware of possible expenses that could be included under the Care and Support Statutory Guidance 2014 (Care Act 2014) Annex C.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
23/24	The complainant complained that the Council was not providing them with the support they needed and consequently struggled with day-to-day activities. They complained that an assessment of their needs had not taken place in what, they felt to be an acceptable timescale.	Communication; Professional Practice; Delay in providing service	Not upheld	The Ombudsman recognised that the complainant had made multiple approaches to both the Council and LGSCO over a number of years regarding their care needs which had been suitably addressed. The ombudsman identified that there is no statutory timescale for completion of needs assessment and the Council's decision to wait for the return of a worker from a period of leave and with whom that the complainant had a positive relationship with was reasonable. The Ombudsman also noted that suitable alternative provision such as weekly contact with the duty team and a reconsideration the timescale for assessment if his situation becomes more urgent had been made by the Council. As such they found no fault with the Council's actions in this case.

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
23/24	The complainants complained that the Council did not properly explain the charges for their late family member's care home. They also say they were denied a choice of alternative care provider	Communication; Decision around funding; Invoice dispute or delay; Policy; residential or nursing care	Upheld	The Ombudsman recognised when a family member moved to the care home there was no expectation by their representatives that they would pay for it. There was evidence to suggest that the Council should pay for care and that it had indicated it would. The Council did accept that a letter of agreement should have been sent to the representatives. It was identified that the representatives would have been aware that there was a charge for care as they were over the threshold for Council funding. It was also identified that the Council were not responsible for any delays to the family member returning home. The Ombudsman noted that the Council should have done more to tell the representatives they could have direct payments and as a remedy for the complaint identified that the Council should: a. reminds officers of the need to tell people they can have direct payments, if they want them; b. takes action to ensure financial assessments are not subject to delays; takes action to ensure letters of agreement are sent out at the right time and to the right person
23/24	The complainants complain on behalf of a family member. They complain that the Council has not done enough to assist the family member in	Communication; Delay; Decision around	Not upheld	The Ombudsman recognised that the Council had proactively worked with the family in trying to secure alternative accommodation for the family member. The Ombudsman noted that the Council had supported the

Date of complaint referral	Complaint summary	Complaint themes	Decision	Remedy/Learning
	moving out of the care home where they are living and move into the community near to the representatives.	assessment and eligibility		client with their move; had assessed care needs regularly; had sought for an alternative provision of a placement within the Council's own area which had been declined by the family and was liaising with a Council within the family's preferred location.
24/25	The complainant complained on behalf of a family member, about delay in the Council considering their application for a Disabled Facilities Grant. The representative says they have had to pay for the works privately due to the Council's failings.	Delay in providing service; Communication	Upheld	Whilst the Ombudsman could not support that the works were undertaken by the family prior to council involvement which it recognised were at their own expense, it did recognise that there were delays by the Council in assessing the suitability for work. The Ombudsman noted that they did not make any service improvements as the Council had identified the changes it was making to reduce delays, including a new process, new staff and strategic level meetings to analyse learning from complaints about adaptations but did make a financial reward to the family for the delays.

Appendix 3 – Equalities information

Primary Support Reason	
Physical support - access and mobility only	29% (57)
Physical support - personal care support	10% (19)
Learning disability support	13% (26)
Not recorded	19% (38)
Support with memory and cognition	11% (22)
Mental health support	6% (12)
Not recorded – corporate	3% (5)
Social Support – support for carers	4% (7)
Sensory support - support for visual impairment	2% (4)
Social Support - Support for Social Isolation / Other	2%(3)
Sensory support – Support for dual impairment	1% (1)
Sensory Support – support for hearing impairment	1% (1)

Gender of Complainant	
Female	63% (122)
Male	33% (65)
Unknown	7% (8)
Gender of person drawing on services	
Female	47% (92)
Male	45% (88)
Unknown	8% (15)

Ethnicity

Ethnicity of complainants	2024/25
White - English/Welsh/Scottish/Northern Irish/British	78% (153)
Not recorded	18% (36)
Other ethnic group - Other	2% (4)
Any other white background	0.5% (1)
Asian/Asian British	0.5% (1)
Mixed/multiple ethnic groups - Other	0.5% (1)
Mixed/multiple ethnic groups - White and Asian	0.5% (1)

78% of the total people using services complained about told us they are White-English/Welsh/Scottish/Northern Irish/British, with a further 0.5% listed as Any other white background. 3.5% of complainants told us they are from mixed or multiple ethnic groups.

We do not hold a record for 18% of our complainants.

People do have a choice whether to disclose to us their ethnicity and gender, but the figures recorded in this section are not dissimilar to the ethnicities and genders of people who come into contact with the Council from within the conurbation.

This information will feed into our Equalities, Diversity and Inclusion review work.

Appendix 4 – Learning from customer feedback

NB - Below is a summary of learning which is measured and reviewed as part of the quality assurance framework.

Origin of learning and issues raised	Learning improvement identified	Measure/outcome of learning
Individual members of staff and the advice they have provided to people accessing services.	Practice Learning reviews are held between practitioners and managers which allow for reflective practice. Any specific learning for individual staff is picked up during these sessions or during supervision.	Review of complaints and comments in 25/26
Charging for care and the accuracy of invoicing.	Cases were reviewed on an individual basis. Where action, such as re-assessment was identified this was undertaken and outcomes made clear. However, in cases where appropriate signposting, such as repayment plans were identified, then this was also undertaken.	Review of complaints and comments in 25/26 for earlier resolution of issues.
Quality and availability of care that was received by providers.	The matters raised were identified with the providers and appropriate reflective action taken. BCP Council's monitoring team will continue to review the issues raised as part of their ongoing contractual work with the providers concerned.	Review of complaints and comments in 25/26
One complaint was received regarding a young person transitioning between CSC and ASC teams and the services that were now available to them including Direct Payments.	A review of the process of transitioning between CSC and ASC was undertaken. This has included arranging a regular meeting between both CSC and ASC financial services to highlight the young people approaching 18 in that financial year, so any complex transitions can be managed with clear communication.	Review of complaints and comments in 25/26

Origin of learning and issues raised	Learning improvement identified	Measure/outcome of learning
One complaint was received regarding reaching the capital threshold for care and delays in accessing services.	A review was undertaken regarding the delays experienced. BCP Council now have a dedicated worker that supports people whose capital is falling below the capital threshold.	Review of complaints and comments in 25/26
Delays in people being able to access services.	The ASC Strategy and Transformation Plans focus on new ways of working and prevention, and early indications show that people are now waiting less time to be supported. In addition to improve the time people were waiting, staff were redeployed to focus on areas where people were waiting longest.	Review of complaints and comments in 25/26
One complaint was raised regarding accessing a CHC assessment and the process undertaken in relation.	A review was undertaken and CHC assessment undertaken. As part of this review the service recognised the importance of ensuring that families are informed and updated about the Continuing Healthcare process. In addition consideration of the CHC process was to be recorded during peer huddles which included explaining to families why we are or are not applying at that time.	Review of complaints and comments in 25/26

Origin of learning and issues raised	Learning improvement identified	Measure/outcome of learning
One complaint was received regarding a client's perception that a manager would not return their calls.	After review, it was identified that a procedure for dealing with teams calls during absences e.g. forwarding calls/out of office messages should be undertaken. This included: - Ensuring that staff check their call logs on teams daily to alert staff to missed calls even if no voice mail is left - Raising the issue of not responding to voice mails in a timely manner in staff supervision and to consider the appropriateness of the method of communication based on the situation - Ensuring that staff advise people of the purpose of their involvement and that this is time limited, when they commence work with the person and their family	Review of complaints and comments in 25/26
One Complaint was received regarding the allocation and use of carers vouchers	A wider review of the carers vouchers service has been undertaken, however, in the interim, any vouchers sent out are now accompanied by a leaflet or covering letter explaining the allocation and how to redeem them.	Review of complaints and comments in 25/26